

A
SHORT HISTORY
OF THE
"HOUSE OF RECOVERY"
OR
FEVER HOSPITAL,
IN MANCHESTER.

BY
FRANK RENAUD, F.S.A.

1885.

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A
SHORT HISTORY
OF THE
“HOUSE OF RECOVERY,”
OR
FEVER HOSPITAL,
IN MANCHESTER,
FROM ITS ESTABLISHMENT IN 1796 TO THE
PRESENT TIME.

*COMPILED FROM PRINTED REPORTS AND PERSONAL
REMINISCENCES,*

BY FRANK RENAUD, F.S.A.,

FORMERLY ONE OF THE PHYSICIANS
TO THE SAME.

1885.

SL

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At a meeting of the Board of the Manchester Royal Infirmary, held on September 28th, 1885, Mr. J. W. MACLURE in the chair, the Secretary (Mr. W. L. Saunder) notified that he was in possession of a MS. History of the Fever Hospital, compiled by Dr. Renaud at his request and suggestion, and further that he had the writer's authority to place the same unreservedly at the disposal of the Board ; thereupon after the same had been read,

It was proposed by Mr. MACLURE,

Seconded by Sir JOSEPH HERON,

and resolved unanimously :

“That this Board desires to express its high appreciation of the great ability which characterises the preparation by Dr. Renaud of ‘A Short History of the House of Recovery, from its establishment in 1796, to the present time,’ a record which will prove invaluable as a most important contribution to the history of the Manchester Royal Infirmary and its affiliated Institutions ; and hereby conveys to Dr. Renaud its unbounded thanks for the great labour and study which have been devoted to its compilation ; and that he be requested to allow it to be printed, at the expense of the Institution.”

to the reception and treatment of Fever Patients. This house, together with 3,961 square yards of land, was situated at the Aytoun Street corner of Portland Street, the frontage in Portland Street being 81 yards and the side in Aytoun Street 45 yards, the whole forming an oblong square.

The Physicians and Surgeons of the Infirmary were constituted the Professional Staff. Medicines were dispensed at the Infirmary, under the supervision of the House Apothecary.

The success attendant on this arrangement was such that, in October following the Poor Law authorities felt justified in subscribing £20 a year towards the funds. Before the end of the year it was thought desirable to make arrangements for an enlargement of the Institution, with the view to accommodate patients suffering from Scarlet Fever. Some land adjacent was therefore purchased, with houses built thereon, comprising 838 square yards. The entire rental was thus raised to £300 per annum, and the Trustees became owners of three dwellings devoted to charitable uses.

In November, 1800, after proposals had been made for a further extension of this improvised hospital, the Committee realised that something of a more complete and permanent character was needed. They therefore declined to spend additional money on this

site, and set about collecting funds for the erection of a new and more commodious hospital, which they proposed to build on a vacant plot of land at the Chatham Street corner of Aytoun Street—on land, in fact, at the present time occupied by the Grand Hotel. The estimated cost of this new building was £4,740. The ground rent came to £300, which sum was partially covered by letting out the former buildings at an annual rent of £200.

This new Fever Hospital, or “House of Recovery,” was a substantial building of brick, void of all adornment, three storeys in height, and entered from Aytoun Street. It was built to give accommodation to 100 patients suffering from infectious fevers; and had all necessary domestic offices, and a Boardroom. The area occupied by the building and surrounding ground represented 2,425 yards; and, as the former grounds and buildings facing Portland Street were likewise the property of the Trustees, the entire plot of land now owned by them represented a parallelogram, the longest side of which was in Aytoun Street, and extended from Portland Street to Chatham Street.

The new Fever Hospital was finished, and opened for the reception of patients, in 1803. It was designated the “House of Recovery”; and, to use the language of its founders, was intended “to meliorate the condition of the poor; to prevent the generation

“ of diseases ; to obviate the propagation of them by
 “ contagion ; and to mitigate those which exist by
 “ providing comforts and accommodation for the sick.”

Taking the then state of population into account, the Committee considered the provision was so ample for all contingencies, as well as for the separation of cases of Scarlet Fever from Ordinary Fever, that they hoped only a small portion of the building would be in general tenanted.

The Board meetings, which heretofore had been held at the Bridgewater Arms Hotel, were in future conducted monthly, in the Boardroom of the Institution. Sir Robert Peel was elected the first President, and fulfilled this office for the space of twenty-seven years, when he retired in favour of the Earl of Wilton. Sir Robert took a lively interest in the welfare of the House of Recovery, and the Board made a suitable acknowledgment of his services when he retired.

The Professional Staff remained as it was ; and a Resident Clerk, or Medical Officer, was appointed, whose duties were divided between superintending the patients in the House, and in visiting such others out of the boundary of the Infirmary Home Patients' district, as were recommended by subscribers. A code of rules was drawn up ; and, amongst other stipulations, it was ordered that deeds, evidences, and writings,

relating to the Institution, were to be kept in a chest, having three locks, the keys of which were to be held by separate parties. This chest, together with its contents, has unfortunately been lost, or else mislaid.

The Records of the Institution, from its beginning in 1796 to the year 1804, are preserved in a printed book, entitled "Public Proceedings of the Board of Health in Manchester," copies of which may be seen in the Chetham College Library, and in the Reference Library of the Manchester Corporation. Annual Reports for the years 1809, 1811, 1812, 1818, and 1837 are preserved in a book belonging to the Royal Infirmary. From the year 1818 to the year 1852—when the House of Recovery was amalgamated with the Infirmary by Private Act of Parliament—the annual reports, with the exception of that for 1837, may be referred to in volumes preserved in the Manchester Reference Library in King Street, entitled "Political Pamphlets." In 1809 Mr. J. Bradley filled the office of Resident Clerk. He was succeeded, in 1811, by Mr. Thomas Darnell, who retained it till 1821. Mr. Darnell was succeeded by Mr. Thomas Nursaw, who retained the post for two years, and was followed by Mr. Boardman in 1824. To him Mr. Wallis succeeded in 1827. In 1830 Mr. Ed. Johnson was Resident Clerk. He died in 1832; and Mr. Walker Golland filled the vacancy thus

created, and retained it till 1835, when Mr. Thomas Darnell again occupied the post, after an interregnum of 14 years. Mr. Darnell performed the duties of Resident till the year 1849, when he resigned the office, and retired to the North of England. The Board, on this occasion, had the following record entered on the minutes: "At the request of the Resident Medical Officer, Mr. Thomas Darnell, the Committee have been under the necessity of accepting his resignation of office; and they have thus lost the services of a gentleman who, for a period of twenty years, has devoted his whole time and talents to the relief of the sufferings of those admitted into the House, and who, by unwearied diligence, and the strictest attention to the whole economy of the sick department of the Hospital, has obtained the best thanks of the General and Medical Board."

Mr. T. Darnell was tall and spare in person, shy and retiring in manner, and of a temperament strongly inclined to timidity. For many of the later years of his residence, he seldom went beyond the walls of the Hospital, though he might often be seen at the door, attired in a long drab overcoat reaching to his heels, and holding a case book under his arm, hesitatingly looking up and down Aytoun Street, and again retiring, shrinkingly, into his private apartments. Until he resigned office, he had never travelled by

railway, and would speak of his approaching journey northwards as an ordeal he would gladly have avoided. On the retirement of Mr. Darnell, Mr. Thomas Ingham was elected to fill the vacancy; and he retained the office for the space of four years, when he died from causes unconnected with fever.

If Mr. Darnell had been singular in some respects, his successor was as remarkable in others. Mr. Ingham, having been endowed with an ample private fortune, practised his profession for many years at Shields, in Northumberland. He devoted his leisure to science, literature, and the fine arts; but having incautiously purchased some shares in a joint-stock bank, at a time when shareholders were held liable in their whole property for three years after ceasing their connection with the same, Mr. Ingham sold out his investments, not feeling secure. At the end of two years the bank failed, and all Mr. Ingham's patrimony and private estate became thereby confiscated, with the exception of a large and choice library of books, and a number of carefully selected line engravings, which he was permitted to retain.

Having passed his 60th year, and feeling no inclination to resume his former work, but yet desirous of benefiting others, he applied for, and obtained the office of Resident at the House of Recovery. Thither he brought his books and engravings; and, like his

predecessor, he rarely quitted the Hospital. He was a diligent reader, and, unlike many men who accumulate books, would return to them again and again. So abstemious in diet was he, that a teacupful of beef tea commonly sufficed for a day's sustenance. To those who knew and appreciated him, Mr. Ingham was a delightful companion, especially when discussing literature and art. Buyers from London and elsewhere were attracted to Manchester when his books and engravings were disposed of.

To return from this lengthy digression: in the year 1808 two hundred and sixty patients had been admitted. The three disused houses were advertised to be sold, and the notice for sale was repeated each year in the annual reports till 1826, when it was withdrawn; but they continued to be let, and, besides other premises which were used as livery stables, occupied an area of 2,000 square yards.

In the Annual Report for 1812, the Committee observed: "There was one subject of much gratification to them, viz., that several individuals in respectable situations in life had become inmates of the House of Recovery, thereby relieving their anxious friends from the danger of infection, and demonstrating to the necessitous poor the advantages and comforts to which the latter are compelled to resort. From patients of the class above alluded to, a proper remuneration had been demanded and readily granted."

In 1818 the annual income amounted to £888. The admissions were 446, and of this number 12 were persons suffering from Scarlet Fever.

Up to the year 1820, the average number of patients received into the House of Recovery, since it was first opened, was 360 annually.

In 1822, Miss Ashton, of Pendleton, left a legacy of £1,000 to the institution; and Mr. William Jones bequeathed £500 to it. As the building was standing in much need of repair, both these amounts were devoted to this purpose. Four years later, *i.e.*, in 1826, Mr. E. Chantler left another legacy of £1,000 to the Charity; whilst Mr. Dauntsey Hulme, the Vice-President and warm friend of the Fever Hospital, made a benefaction to it of £4,000, subject only to a life annuity of £160, which lapsed two years afterwards, *i.e.*, in April, 1829, when Mr. Hulme died. In this same year also Miss Frances Hall died, and left a legacy of £11,000 to the House of Recovery.

The first mention of Measles being admitted into the wards occurs in 1830; and in the Report for this year, in addition to ordinary fevers, cases of Scarlet Fever and of Smallpox are recorded as well as Measles. Touching this latter eruptive fever, the following remarks are entered in the Annual Report: "More cases of Measles would have been taken in had it

appeared that the receipt of such was contemplated by the founders of the House of Recovery; for, during many years, Measles have been far more destructive than Scarlet fever."

From the first opening of the Institution, thirty-three years before this date, 13,067 patients had been admitted to its benefits, out of which number 1,455 had died, thus making an average of 11 per cent. of deaths.

In "Wheeler's Manchester," it is recorded that, in 1835, the annual income of the House of Recovery was £1,616. 13s. 1d.; and that funds had been accumulated to the amount of £21,002. 10s. 6d. The first mention of retiring active physicians and surgeons having had the distinction of "Consulting Medical Officers" to the Fever Hospital conferred on them, is to be found in the Annual Report for 1843, when Drs. Mitchell and Lyon were so designated.

Nothing out of ordinary routine occurred till the year 1847 was reached, memorable in British annals for the potato blight and all its attendant miseries.

From the failure of this article of diet, Scurvy broke out in Manchester, causing the gums to swell, bleed, and be discoloured like mulberries. This was succeeded by a formidable and fatal outbreak of Dysentery, which was followed by an equally alarming epidemic of Typhus and Typhoid fevers.

The wards in the House of Recovery were soon filled, and hundreds of patients had to be attended at their own dwellings. So great was the pressure that the Board of Guardians felt called on to establish a separate and independent Fever Hospital in a disused factory, and appoint medical officers thereto. In 1847, 955 patients passed through the House of Recovery, and in the following year the number reached 1,049.

With a view to meet the unusual strain on the Hospital funds thus created, two active and zealous members of the Board—Mr. George Faulkner and Mr. Samuel Fletcher—raised £1,150 by personal canvass, and a larger sum, viz., £1,500, was withdrawn from the funded stock.

In 1849 the numbers fell to 878; and the inhabitants of Manchester and neighbourhood, by subscribing liberally towards meeting this high wave of epidemic disease, enabled the Committee to restore the sum previously withdrawn from the capital account. But this proceeding, though it had only temporarily crippled the resources of the Institution, marked a turning point in its history with regard to the future admission of pauper patients, the initial stages of which were shadowed forth in the following memorandum, appended to the Report for the year 1849:—

“It having been ascertained that very many of the cases sent into the Hospital consisted of persons whose

names were entered on the parochial books, a deputation of the Committee waited on the Board of Guardians, when, it having been shown that the subscriptions annually made by the Guardians of the Poor were this year disproportionate to the number of patients sent by them, an arrangement was entered into whereby the wants of this class of persons are for the present provided for, and the disbursements of the House of Recovery proportionally economised."

The Guardians of the Township of Manchester subscribed £120 towards past arrears; the Chorlton Guardians subscribed 50 guineas; and the Salford Guardians £24.

Next year, *i.e.*, in 1850, a further step was taken by the Committee towards bringing the working details of the House of Recovery into greater harmony with the changed circumstances of the times. They placed on record the following memorandum and resolution:—

"The Trustees are aware that, at the time when the House of Recovery was first established, the law made no provision for the relief of the sick poor. To meet the social necessity of the time, the House was open to all classes of the community without distinction, and upon the same terms, *viz.*, the recommendation of a subscriber. Since that time the State has made provision, to a great extent, for the medical

relief of the destitute poor, and the entire community is taxed for the maintenance and medical treatment of that large class of sufferers from contagious fevers, viz., the paupers. The poor rate offers a sure provision in sickness to them. The Board, taking these changes into consideration, have formed the opinion that the time is come for a change of policy conformable to the present state of things. They have come to the resolution to admit the pauper class of fever patients only on the condition that the Guardians of the Poor pay a fee of two guineas for each patient they send into the House of Recovery. By this measure the Board hope to prevent the funds of a voluntary charity from being drained away from the legitimate channel: the bestowal of the funds of a voluntary charity on the pauper not being charity, but an abuse of charity. The Board consider the funds of this charity ought to be set apart for people who, though poor, are unwilling to claim the privilege of a pauper in sickness, and are yet unable to pay for medical aid themselves, and can avoid contagion by no other means than the removal of their sick to the Hospital."

Domestic servants were to be admitted, as before, on payment of ten shillings weekly, and depositing one pound in advance.

The above-written arrangement answered so well

for the House of Recovery, that in 1851 the Board were able to report as follows: "That the new system of charging two guineas for each pauper case had worked most efficiently in securing ready and convenient accommodation for a respectable class of working people and domestic servants, which the influx of pauper patients previously rendered impracticable."

The total admissions during the year fell to 421, out of which number 12 were treated for Small-pox.

The Poor Law Guardians now came to the resolution to build a Fever Hospital for paupers, and to withdraw the subsidy hitherto paid to the House of Recovery. They erected it on a plot of land occupied by them in connection with the Workhouse, in Bridge Street, facing Strangeways.

Following shortly in the wake of these altered arrangements, other changes of a more permanent nature, and arising out of extraneous causes, came up for consideration.

Portland Street, which heretofore had terminated at Brook Street, was lengthened out and brought into direct communication with Oxford Street, thereby creating a main artery for traffic with Piccadilly, to the great relief of the choked communication up Mosley Street. This improvement not only enhanced the value of land in Portland Street, but speedily led

to the erection of warehouses on sites up to now occupied by mean and squalid dwellings. Thus, with a diminished demand on its resources, it began to be felt that the ground directly and indirectly occupied by the House of Recovery was out of all proportion to present requirements, and could be turned to a much more profitable account: that, by a sale of the same, and a transfer of the Fever Hospital to a space within the area of the Royal Infirmary, a considerable saving in the working expenses could be effected, and a large addition made to the funded property, which could be kept separate, or be amalgamated with a general fund, for the conjoint maintenance of the House of Recovery, Royal Infirmary, and Lunatic Hospital. Accordingly, in May, 1852, a private Act of Parliament was obtained, which enabled the Trustees to carry this project into execution, and bound the House of Recovery to the Infirmary by a closer tie than had hitherto united these two kindred Institutions.

The property and funds of the Fever Hospital were vested in the President, Treasurers, and other officials of the Infirmary, Dispensary, and Lunatic Asylum. Power was obtained for the sale of the lands and buildings belonging to the Hospital, and for the sale of the Fever Hospital itself, conditionally to suitable provision being made within the Infirmary precincts

for the accommodation of 80 fever patients, *if required*. Both Institutions were to be under the same management, and patients entitled to share in the benefits of the House of Recovery, in accordance with the rules and regulations *then* subsisting, were to be provided for by the Infirmary Board. Already, in 1851, a plot of land, comprising 1,020 square yards, at the Portland Street corner of Aytoun Street had been conveyed to Mr. James Brown by the Trustees of the Fever Hospital for the erection of a warehouse, he, his heirs, and assigns, agreeing to pay for the same an annual chief rent of £647, of which £572 was redeemed in 1862 on payment of £11,440.

In November, 1852, eleven hundred and forty-two yards of land in Portland Street, belonging originally to the Fever Hospital, and adjoining Mr. Brown's warehouse, were purchased from the Infirmary Board by Messrs. Kershaw for a like purpose. For this a sum of £5,062 was paid, and the land made further subject to a chief rent of £300. In the year 1855 Consolidated Stock from the House of Recovery to the amount of £29,187. 1s. 5d. was transferred to the Infirmary Authority.

Shortly preceding the above events, by reason of the demands made on the resources of the Infirmary being in excess of its capacity to meet them, two wings had been added to the building; and as their maintenance

entailed a larger expenditure than could be covered by the annual income, the redundant funds of the House of Recovery came in opportunely towards enabling the Infirmary Board to augment the usefulness of the parent Institution without encumbering it with a large and increasing deficit.

In 1853-4 the receipts from the House of Recovery were £2,539 6 8

The expenditure came to..... 1,515 6 4

Thus leaving a sum of..... £1,024 0 4
to meet the Infirmary deficit. In 1854-5 the Infirmary debt amounted to £1,072. 19s. 10d., which was again defrayed out of the funds of the Fever Hospital. From this time forward the amalgamation of the funds of the two Institutions was an accomplished fact.

During the greater part of this year arrangements were being made for lodging Fever patients in the wards of the south wing of the Infirmary, which, though under the same roof, was isolated from the rest of the building, with the view to prevent the communication of infection to other patients suffering from miscellaneous disorders and diseases.

Singular, and almost unaccountable as such a procedure may now appear, it was a mild measure compared with the more drastic one advocated and practised by the leading hospital physicians of Europe—and for a brief period adopted at the Infirmary—

of distributing a proportion of Fever patients in wards occupied by persons suffering from non-infectious complaints.

In the report for the year 1855-6, the Board state that, from the time the two Institutions have been united under one roof, they have pleasure in announcing that the new arrangement has worked satisfactorily, and that the results of the union have answered their expectations. The number of Fever patients admitted during the year was 224, of which 157 had gone out cured, and 28 were remaining in the house.

Next year great satisfaction was expressed at the large proportion of recoveries made, and the Board were enabled to state that all their favourable anticipations from the union of the two Institutions bade fair to be realised.

In 1857, after the Hospital in Aytoun Street had been empty for two years, it was licensed and temporarily converted into a hotel, during the period of the Art Treasures Exhibition at Old Trafford, at which time the ordinary hotel accommodation of Manchester, and private hospitality, proved inadequate to meet the demands of numerous visitors from all parts. This hotel was well patronised, and, so far as is known, no harm came to any of the occupants.

The numbers of patients admitted into the Infirmary

wards fell from 282 in 1858, to 220 in 1859, and to 120 in 1860. This steady declension enabled the Board to lessen the space set apart for the reception of Fever patients, and to devote the room so gained to more general uses, thus extending the benefits of the Infirmary for the use of the inhabitants of Manchester and the neighbouring towns. The land on which the Fever Hospital stood, together with the yard adjacent, was sold, in 1865-6, for £21,000.

The number of beds set apart for contagious diseases was reduced to 32; and the calculation proved so far correct that, in 1867-8, the Board was able to report it more than sufficient for all cases brought for admission, though a rider was added to the effect that, if from any circumstances this reduced number of beds should be found insufficient, it would be increased up to 80, in accordance with the obligations which the Act of Parliament had imposed. But so little demand had been made on these 32 beds that the Board, with the view to utilise them to the fullest extent, had already received Fever and other patients suffering from contagious diseases from the outlying unions of Prestwich and Withington, from which latter Small-pox was included. With these additional demands, the number of patients did not exceed 26, at any one time,

in the wards, whilst the daily average for the year was as low as 11.

Encouraging as such returns could not fail to prove, at a time when the administration of the Fever Hospital was in a transition stage, they could only be taken to represent one of those comparative lulls in the history of epidemic outbursts which are but too frequently precursors of more serious invasions. The Board accordingly prepared for less favourable conditions; and realising the especial gravity of Small-pox, and the desirability of more perfectly isolating patients afflicted with it, applied for, and obtained from the Board of Guardians, permission to make temporary use of their disused Cholera Hospital in Canal Street, Ancoats, for this purpose.

Although no recognisable evils had yet followed from the near juxtaposition of Fever and other patients in the Infirmary, it began to be felt that not only would a complete isolation of the two be more in agreement with prevailing sentiment, but that, also, the space taken from the general purposes for which the Infirmary existed, could ill be spared. A movement in this new direction having sprung up in the year 1869-70, was greatly quickened by the announcement made by Mr. Robert Barnes, that he would devote £9,000 towards the cost of a New Fever Hospital, to be built in a suburb of Manchester.

Eleven acres of land were accordingly purchased on the Monsall Estate, in the township of Newton Heath, near Miles Platting, at a cost of £5,250, and measures adopted towards making a new beginning on an enlarged basis, and with aims more in unison with the social requirements of a constantly increasing community. Building operations were forthwith begun on the new site; and, in addition to permanent buildings to accommodate 96 patients, a wooden pavilion was erected on brick foundations, calculated to hold 32 more patients, all of whom could then be classified and treated in accordance with the particular type of infectious complaint under which each was suffering. The new "Barnes House of Recovery," thus inaugurated, was made sufficiently complete to allow of its formal opening on the 10th of June following.

At this stage it will be just and proper to recognise that much of the initiative of the new and enlarged undertaking was due to Dr. Reed, the then Resident Medical Officer at the Infirmary, who had brought with him to Manchester a matured experience previously gained at the London Fever Hospital, and which he placed unreservedly at the disposal of the Board. And it so happened, at this particular crisis in the history of the Infirmary, that a double outbreak of Fever and Small-pox sprang up, which taxed the

organising capabilities of the Board to the utmost, and induced them, most reluctantly—acting under the advice of the Medical Staff, including the Resident Officer—to sanction the erection of temporary wooden sheds, on the Infirmary grounds, for the accommodation of the large influx of patients thus created. Not less than 411 patients, suffering from infectious disease, were received into the Institution during the year; and thus, through the timely provision made at Monsall, and elsewhere, the conditions of the Act of Parliament were more than complied with.

The Corporation of Manchester voted a sum of £1,000 towards the maintenance and accommodation, at Monsall, of patients suffering from Small-pox, a measure wisely conceived, and one that materially aided in the suppression of this disease for the time being. This contribution may be regarded likewise as a formal recognition, on the part of the Health Authority, of their obligation to give permanent and substantial aid to the Infirmary Board, in their dealings with every type of contagious, infectious, and epidemic disease, at Monsall, rather than inaugurate a separate and independent Institution of their own. And, indeed, this was the view taken by the Board, not only in respect of Manchester proper, but of the neighbouring communities; for they publicly expressed the opinion that the expenditure on such

types of illness should not be borne by public charity alone, but should be supplemented by wise and liberal pecuniary aid on the part of the Health Authorities of towns, without which they would be unable thoroughly to utilise the means possessed by them for the isolation and suppression of such diseases.

Not to overload this brief narrative with minute detail, it may suffice to say that, as Typhoid Fever, Scarlet Fever, and Small-pox, the two latter especially, continued to prevail, in excess, up to and beyond the year 1875, the Infirmary Board grew all the more desirous of making their Institution at Monsall as serviceable to the general public as possible. Actuated by these laudable motives, they entered into more formal communication with the Health Committee of the Manchester Corporation, and the various Local Boards in and around Manchester. Patients sent in were to be received on certain stipulated conditions, and the complying Local Authorities were to be allowed to erect temporary accommodation, for their own purposes, on the unoccupied ground. The offer was accepted by the Corporation, and by some of the Local Boards; whilst others not only declined these overtures, but neglected to make provision in their several jurisdictions for persons suffering from contagious diseases.

The Corporation of Manchester now built a tempo-

rary pavilion for the reception of 32 patients suffering from Small-pox ; and some out-township authorities combined together, and erected another pavilion for a like number of patients similarly affected. The total accommodation at Monsall was thus brought up to 192 beds. In 1881 a provisional arrangement was entered into with the above authorities for three years, by which they agreed to pay, in proportion to their population and ratable value, a sum of £1,300 a year towards establishment charges, and twenty-one shillings a week for each patient sent to Monsall.

Arrangements were likewise made with the Poor Law Guardians of Manchester, Chorlton, and Prestwich, for the reception of pauper patients, on payment of thirty shillings per head per week, subject to their not being sent into the Hospital clad in pauper uniform. Arrangements were also made with the Salford Corporation for the reception of their surplus infectious cases of disease at the rate of twenty-five shillings for each patient per week, with an additional charge of £100 per annum towards establishment charges.

Attention was directed to the fact that every accommodation had been provided for the reception of private patients, able to pay for admission, who would be treated in private wards set apart for this purpose.

By reason of the increased responsibilities thus

undertaken in the general interests of the community, it became necessary for the Infirmary Board to enlarge the building area. Negotiations were set on foot accordingly, for the purchase, on lease, of four additional acres of land, adjoining the eleven acres already secured. When this transaction was brought to a favourable issue, in the year 1885, at an annual charge of £180, the Infirmary Board sanctioned the erection of two new brick pavilions, to hold 48 and 24 beds respectively. They further determined upon having a home for nurses and servants built on the premises, calculated to house and accommodate fifty inmates. The cost of these additions came to £8,500. Then again, as the wooden huts originally set up had now served their purpose, they were to be replaced with more permanent structures.

In addition to all this, the Infirmary Board have undertaken to contribute £500 per annum, in excess of any subscriptions they may receive on account of the Monsall Hospital, so long as their compact with the Health Authorities lasts, or remains unaltered. The Board take the responsibility of providing accommodation for all cases of infectious disease—Cholera excepted—sent to them by the Health Authorities included in the above contract; and they further agree to devote any profits found standing to the Monsall Hospital account, either to an extension of

the premises, or to an eventual reduction of future payments by public health authorities.

Brief as this running narrative of bygone events has proved, and compiled, as it has been, at the instigation of Mr. W. L. Saunder,—whose laudable interest in everything relating to the past history of the Infirmary is patent to everyone closely connected with the administration of this great Charitable Institution,—it is hoped that it will in some measure rescue from an undeserved oblivion the early history and gradual expansion of one of the most meritorious, though not the most conspicuous, of the Medical Charities of which the City of Manchester has such just cause to feel proud, founded when the town was but merging from comparative obscurity, and when private benevolence neither sought nor obtained advantages, which the State not only now confers, but renders imperative.

NAMES OF THE PHYSICIANS TO THE FEVER HOSPITAL

From its commencement in 1796 to the year 1885.

1796.

Thomas Percival.
John Ferriar.
Samuel Argent Bardsley.
Edward Holme.
Alexander Taylor.

1809 to 1812.

John Ferriar.
Samuel Argent Bardsley.
Edward Holme.
William Henry.
William Winstanley.
John Mitchell.

1814 to 1818.

Samuel Argent Bardsley.
Edward Holme.
John Mitchell.
Henry Hardie.
Edmund Lyon.
Edward Carbutt.

1824.

Edward Holme.
John Mitchell.
Henry Hardie.
Edmund Lyon.
Edward Carbutt.
James Lomax Bardsley.

1827.

Edward Holme.
John Mitchell.
Edmund Lyon.
Edward Carbutt.
James Lomax Bardsley.
James Davenport Hulme.

1828.

John Mitchell.
Edmund Lyon.
Edward Carbutt.
James Lomax Bardsley.
James Davenport Hulme.
William Charles Henry.

1835.

John Mitchell.
Edmund Lyon.
Edward Carbutt.
James Lomax Bardsley.
James Davenport Hulme.
Charles Phillips.

1836.

John Mitchell.
Edmund Lyon.
James Lomax Bardsley.
James Davenport Hulme.
Charles Phillips.
Peter Wood.

1838.

John Mitchell.
Edmund Lyon.
James Lomax Bardsley.
James Davenport Hulme.
Peter Wood.
John Pendlebury.

1841.

James Lomax Bardsley.
James Davenport Hulme.
Peter Wood.
John Pendlebury.
Ralph F. Ainsworth.
George A. Chaytor.

1842.

James Lomax Bardsley.
 James Davenport Hulme.
 Peter Wood.
 Ralph F. Ainsworth.
 George A. Chaytor.
 Richard Baron Howard.

1844.

James Davenport Hulme.
 Peter Wood.
 Ralph F. Ainsworth.
 Richard Baron Howard.
 M. A. Eason Wilkinson.
 Michael Satterthwaite.

1847.

James Davenport Hulme.
 Peter Wood.
 Ralph F. Ainsworth.
 Richard Baron Howard.
 M. A. Eason Wilkinson.
 Charles William Bell.

1848 to 1852.

Peter Wood.
 Ralph F. Ainsworth.
 M. A. Eason Wilkinson.
 Charles William Bell.
 Frank Renaud.
 Thomas H. Watts.

1853 to 1855.

Ralph F. Ainsworth.
 M. A. Eason Wilkinson.
 Charles William Bell.
 Frank Renaud.
 Thomas H. Watts.
 Henry Browne.

1856 to 1866.

Ralph F. Ainsworth.
 M. A. Eason Wilkinson.
 Frank Renaud.
 Thomas H. Watts.
 Henry Browne.
 William Roberts.

1867 to 1874.

M. A. Eason Wilkinson.
 Thomas H. Watts.
 Henry Browne.
 William Roberts.
 Henry Simpson.
 John E. Morgan.

1875 to 1877.

M. A. Eason Wilkinson.
 Henry Browne.
 William Roberts.
 Henry Simpson.
 John E. Morgan.

1878.

M. A. Eason Wilkinson.
 William Roberts.
 Henry Simpson.
 John E. Morgan.

1879 to 1882.

William Roberts.
 Henry Simpson.
 John E. Morgan.
 Daniel J. Leech.

1883 to 1885.

Henry Simpson.
 John E. Morgan.
 Daniel J. Leech.
 Julius Dreschfeld.

STATISTICAL TABLE, shewing the Number of Patients admitted into the Fever Hospital, from 1797 to 1885, together with the Decennial Census for Manchester and Salford, from 1801 to 1881.

Year.	Number of Patients Admitted.	Decennial Average Number of Patients from 1801.	Population of Manchester and Salford as per Census.	Decennial Average Population.	Remarks.
1797	371				
1798	332				
1799	375				
1800	353				
1801	739		93,363		
1802	1031				
1803	571				
1804	256				
1805	184				
1806	262	406		103,580	
1807	307				
1808	188				
1809	258				
1810	262				
1811	167		113,798		
1812	136				
1813	125				
1814	222				
1815	372				
1816	174	280		136,215	
1817	160				
1818	446				
1819	572				
1820	424				

Year.	Number of Patients Admitted.	Decennial Average Number of Patients from 1801.	Population of Manchester and Salford as per Census.	Decennial Average Population.	Remarks.				
1821	339	478	158,631	195,605					
1822	279								
1823	303								
1824	354								
1825	667								
1826	659								
1827	610								
1828	747	696	232,578	260,642					
1829	507								
1830	315								
1831	472								
1832	774								
1833	287								
1834	404								
1835	402	687	288,707	338,598					
1836	592								
1837	799								
1838	1,372								
1839	1,042								
1840	815								
1841	691								
1842	723	388,490	{ TyphusFever epidemic Guardians discontinued sending patients				
1843	695								
1844	573								
1845	385								
1846	435								
1847	955								
1848	1,049								
1849	878		424,459					
1850	490								
1851	421								
1852	217								
1853	158								
1854	211								
1855	210								
1856	224	234							
1857	279								
1858	282								
1859	220								
1860	120								

Year.	Number of Patients Admitted.	Decennial Average Number of Patients from 1801.	Population of Manchester and Salford as per Census.	Decennial Average Population.	Remarks.
1861	79	242	460,428	482,301	
1862	182				
1863	189				
1864	204				
1865	268				
1866	309				
1867	199				
1868	239				
1869	438				
1870	317				
1871	411	504,175	{ Small-pox epidemic
1872	700				
1873	306				
1874	126				
1875	253				
1876	843	470	536,994	{ Public Health Act passed. Small-pox epidemic. Manchester G'rdns' case again recd. Small-pox epidemic. Chorlton G'rdns' cases again recd.
1877	1,105				
1878	374				
1879	287				
1880	295				
1881	408	560,813	{ Scarlet Fever epidemic. Small-pox & Scarlet Fever epidemics.
1882	585				
1883	662				
1884	1,346				
1885	1,215				
Total Admissns	40,582				

MANCHESTER:

TAYLOR, GARNETT, EVANS, & CO., 3, CROSS STREET.



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